

## STUDENT INFORMATION

Please Print Neatly in Ink

STUDENT NAME :

GRADE: Colchester Middle School

PARENT/GUARDIAN:

PHONE (DAY):

PHONE (NIGHT):

ADDRESS:

CITY/STATE/ZIP: Colchester, VT 05546

ALLERGIES:

MEDICAL CONDITIONS:

**ABILITY LEVEL (CHECK ONE):**

**NEVER EVER** First timer!

**LIFT RIDER** All lessons will be separated into groups on the first night. Groups will be arranged according to ability. Lessons begin at 4:30.

**Please Indicate One of the Following:**

**SKIER**  **SNOWBOARDER**

## IMPORTANT!

In the event of a cancellation due to weather or other reasons, contact CMS coordinator, Ken Epstein for make-up dates. If Bolton Valley and/or CMS are unable to schedule a make-up, vouchers will be issued for rentals and lift tickets. Contact Ken Epstein (CMS): 264-5800 or epsteink@colchester.k12.vt.us

## AFTER SCHOOL PROGRAM 2006/2007

WEEK	DATE
1	Dec. 15
2	Jan. 5
3	Jan. 12
4	Jan. 19
5	Jan. 26
Make-Up	Feb. 2

- Lessons offered for all 5 weeks
- **C.M.S. Ski/Board Program Requires All Participants to Wear an Approved Helmet**

### CHECK THE BOXES THAT APPLY

LIFT TICKET  
(Good from 3pm-9pm)  \$65.00

LESSON  
(1-hour lesson starts at 4:30pm)  \$40.00

EQUIPMENT RENTAL  
(Skis, boots, and poles OR Snowboard and boots)  \$40.00  
OTHER OPTIONS: Check with Bolton Valley  
**Directly** for Lease Packages: 802-434-6833

Equipment Transportation Fee  
(Does not apply to those renting)  \$5.00

TOTAL: \$ \_\_\_\_\_

## PAYMENT is NON-REFUNDABLE

CHECK ENCLOSED

**Please make checks payable to:CMS**

This **MUST** be signed!



## ASSUMPTION AND ACCEPTANCE OF RISK, RELEASE AND INDEMNITY

I know that snowboarding, alpine, Nordic and freestyle skiing, and such other recreational activities as Bolton Valley may offer are action sports carrying significant risk of serious personal injury, death or property damage. I also know there are natural, mechanical and environmental conditions and risks, which independently or in combination with my activities may cause property damage, or severe, or even fatal injuries to me or others.

I agree that I am alone responsible for: (a) my safety while participating in skiing events and or training for skiing events and; (b) providing, utilizing and maintaining the equipment necessary for the safe enjoyment of my participating in such events. I agree and acknowledge that the following persons or entities including the National Ski Areas Association, Bolton Valley Resort, Inc., the promoters, the sponsors, the organizers, the promoters clubs, the officials and any agent, representative, officer, director, employee, member or affiliate of any person or entity named above are not responsible for my safety. I specifically RELEASE and DISCHARGE, in advance, those parties mentioned above, from any and all liability whether known and unknown. I agree to accept all responsibility for the risks, conditions and hazards, which may occur whether they now are known or unknown.

Being fully aware of risks, conditions and hazards of the proposed activity as a participant, coach or official, I HEREBY AGREE TO WAIVE, RELEASE AND DISCHARGE any and all claims for damages for death, personal injury or property damage which I may have or which may hereafter accrue to me as a result of any participation in resort activities, events or training for events, against any person or entity identified above, whether such injury or damage was foreseeable or not, including any such claims regarding the design or condition of any equipment utilized by me in such events without regard to whether such equipment is specified or recommended by such persons or entities identified above.

I further agree to forever HOLD HARMLESS and INDEMNIFY all person and entities identified above, generally and specifically from any and all liability for death, personal injury or property damage, resulting in any way from participating in skiing events or training for skiing events.

I currently have, and I agree to maintain throughout the time that I train and compete, valid and sufficient medical and accident insurance. I understand that this is my sole responsibility and release all persons and entities identified above from providing this coverage for me.

I agree that I will accept and abide by the rules and regulations of the N.S.A.A. and any other rules or regulations imposed by the organizers of any particular skiing event. This Acknowledgment and Assumption of Risk and Release shall be binding upon my heirs and assigns.

By signing this Acknowledgement of Risk Release and Indemnification as Parent/Guardian, I authorize and consent to my ward or child's participation in the above-described activities and acknowledge that I understand than any and all risk whether known or unknown, is expressly assumed by me, and all my claims whether known or unknown are expressly waived in advance. I agree to indemnify all persons and entities identified above, generally and specifically, from any and all liability for death, personal injury or property damage, resulting in any way from my child or ward's participation in any activities noted above.

MEDICAL AUTHORIZATION: I, the undersigned, being the parent or legal guardian of the following child, and giving permission for my child to participate on this ski trip without me, hereby confer upon Bolton Valley, its staff or its agents, authority to sign on my behalf any and all medical or dental treatment contracts and treatment authorization forms without limitation which are deemed necessary for the benefit of my child in the event of illness or injury. I agree to pay for all such treatment and to hold Bolton Valley, its staff, and its agents harmless from these expenses.

PARENT/GUARDIAN'S SIGNATURE

DATE